

Registration Form - Airport Passenger

Submission of this form does not necessarily guarantee your child a seat on a Kids Kab van. Upon receipt of this form we will contact you confirming your child's schedule. **Please PRINT CLEARLY and snail mail or scan/e-mail to liz@kidskab.com or FAX to Kids Kab: 408.342.0101 . PLEASE ATTACH PASSENGER'S ITINERARY!**



CUSTOMER (person(s) responsible for account)

Last Name		First Name	
Address		Apt #	
City	State	Zip Code	
Home Phone	Work Phone	Cell Phone	
E-Mail Address			

PASSENGER INFORMATION

Last Name		First Name	
Age	Gender	Physical Description	
Cell Phone			

Please check appropriate boxes

Location Campus	Stanford	<input type="checkbox"/>	UC Berkeley	<input type="checkbox"/>	Santa Cruz	<input type="checkbox"/>
Camp Attending	iD Tech	<input type="checkbox"/>	Digital Media	<input type="checkbox"/>		
Arrival	<input type="checkbox"/>		Airport	SJC	<input type="checkbox"/>	
Departure	<input type="checkbox"/>			SFO	<input type="checkbox"/>	
				OAK	<input type="checkbox"/>	

EMERGENCY INFORMATION

In case of an emergency, please contact:

Name		Relationship to passenger	
Home Phone	Work Phone	Cell Phone	

I am the parent/legal guardian of the above minor passenger. I have read the Kids Kab Transportation Rules, Policy and Rates, and agree to be responsible for all amounts owed to Kids Kab.

Credit Card Info

Type	Visa	<input type="checkbox"/>	#	Expiration Date
	Master	<input type="checkbox"/>	#	Security Code

Please return the registration form to liz@kidskab.com or mail: 20065 Stevens Creek Blvd. St 1A Cupertino, CA 95014

Kids Kab - Fax: (408) 342-0101, Phone: (408) 342-0100